### Appendix B



# **HUB SUBCONTRACTING PLAN (HSP)**

In accordance with Texas Gov't Code §2161.252, the contracting agency has determined that subcontracting opportunities are probable under this contract. Therefore, all respondents, including State of Texas certified Historically Underutilized Businesses (HUBs) must complete and submit this State of Texas HUB Subcontracting Plan (HSP) with their response to the bid requisition (solicitation).

#### NOTE: Responses that do not include a completed HSP shall be rejected pursuant to Texas Gov't Code §2161.252(b).

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas in accordance with the goals specified in the 2009 State of Texas Disparity Study. The statewide HUB goals defined in 34 Texas Administrative Code (TAC) §20.13 are:

- 11.2 percent for heavy construction other than building contracts,
- 21.1 percent for all building construction, including general contractors and operative builders contracts,
- 32.7 percent for all special trade construction contracts,
- 23.6 percent for professional services contracts,
- 24.6 percent for all other services contracts, and
- 21 percent for commodities contracts.

# - - Agency Special Instructions/Additional Requirements - -

In accordance with 34 TAC §20.14(d)(1)(D)(iii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only contracts that have been in place for five years or less shall qualify for meeting the HUB goal. This limitation is designed to encourage Vendor rotation as recommended by the 2009 Texas Disparity Study.

will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only contracts that have been in place for five years or less shall qualify for meeting the HUB goal. This limitation is designed to encourage Vendor rotation as recommended by the 2009 Texas Disparity Study.
For assistance in completing the HSP, contact the HUB Coordinator, Bernadette Davis at <a href="mailto:bernadette.davis@dir.texas.gov">bernadette.davis@dir.texas.gov</a> .
SECTION 1 RESPONDENT AND REQUISITION INFORMATION

State of Texas VID #:

Phone #: 915-593-3100

	E-mail Address:	mbowman@pdswest.com	Fax #:	915-593-3181
h Is your company a State of Texas certified HUB?		a State of Texas certified HLIB?		

b. Is your company a State of Lexas certified HUB? ☐ - Yes xx- No

Point of Contact: Matthew Bowman

Respondent (Company) Name: Professional Document Systems Inc.

c. Requisition #: JIR-SDD\_TMP\_198 Bid Open Date: 12 / 10 / 2012

(mm/dd/yyyy)

Enter your company's name here:	Professional Document Sv	vstems	Requisition #:	DIR-SDD TMP 198	
		,			

#### SECTION 2 SUBCONTRACTING INTENTIONS

- **No**(If **No**, continue to Item d, of this SECTION.)

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including goods and services, will be subcontracted. Note: In accordance with 34 TAC §20.11., an "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

- a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:
  - \_ Yes, I will be subcontracting portions of the contract. (If Yes, complete Item b, of this SECTION and continue to Item c of this SECTION.)
  - XX No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources. (If No, continue to SECTION 3.)
- b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to Vendors that are not a Texas certified HUB(i.e., Non-HUB).

		HUBs		Non-HUBs
Item#	Subcontracting Opportunity Description	Percentage of the contract expected to be subcontracted to HUBs with which you have had contracts in place for five (5) years or less.	Percentage of the contract expected to be subcontracted to HUBs with which you have had contracts in place for more than five (5) years.	Percentage of the contract expected to be subcontracted to non-HUBs .
1		%	%	%
2		%	%	%
3		%	%	%
4		%	%	%
5		%	%	%
6		%	%	%
7		%	%	%
8		%	%	%
9		%	%	%
10		%	%	%
11		%	%	%
12		%	%	%
13		%	%	%
14		%	%	%
15		%	%	%
	Aggregate percentages of the contract expected to be subcontracted:	%	%	%

(Note: If you have more than fifteen subcontracting opportunities, a continuation sheet is available online at http://window.state.tx.us/procurement/prog/hub/hub-subcontracting-plan/)

Э.	Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.
	- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you have had contracts in place with for five (5) years or less meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements".

Yes(If Yes, continue to SECTION 4	and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)
No (If No, continue to SECTION 4 a	and complete an "HSP Good Faith Effort - Method B (Attachment B)" for each of the subcontracting opportunities you listed.)
Enter your company's name here:	Requisition #:

## SECTION 2 SUBCONTRACTING INTENTIONS (CONTINUATION SHEET)

a. This page can be used as a continuation sheet to the HSP Form's page 2, SECTION 2, Item b. Continue listing the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to Vendors that are not a Texas certified HUB (i.e., Non-HUB).

		HUBs Non-h		Non-HUBs
Item#	Subcontracting Opportunity Description	Percentage of the contract expected to be subcontracted to HUBs with which you have had contracts in place for five (5) years or less.	Percentage of the contract expected to be subcontracted to HUBs with which you have had contracts in place for more than five (5) years.	Percentage of the contract expected to be subcontracted to non-HUBs .
		%	%	%
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		%	%	%
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		%	%	%
		%	%	%
		%	%	%
		%	%	%

SECTION	SELF PERFORMING JUSTIFICATION (If you responded "No" to SECTION 2, Item a, you must complete this SECTION and continue to SECTION 4.)
	appropriate box (Yes or No) that indicates whether your response/proposal contains an explanation demonstrating how your company will fulfill the entire h its own resources.
xx- Yes	(If Yes, in the space provided below list the specific page(s)/section(s) of your proposal which explains how your company will perform the entire contract with its own equipment, supplies, materials and/or employees.)
□- No	(If <b>No</b> , in the space provided below <b>explain how</b> your company will perform the entire contract with its own equipment, supplies, materials and/or employees.)
	A) Appendix "A" point number 9 where we describe the history of our company. PDS has an exceptional track record of providing document imaging systems to a wide variety of clients.
	B) Appendix "B" point 1, we describe how we will market and sell our products and services to eligible DIR customers
	C) Appendix "B" point 2, we describe how we will support our products and services to eligible DIR customers.
SECTION	4 AFFIRMATION
	ed by my signature below, I affirm that I am an authorized representative of the respondent listed in SECTION 1, and that the information and supporting ion submitted with the HSP is true and correct. Respondent understands and agrees that, if awarded any portion of the requisition:
contra- subcor the tot	espondent will provide notice as soon as practical to <b>all</b> the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor for the awarded ct. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the ntracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of cal contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's of contact for the contract no later than ten (10) working days after the contract is awarded.
compli	espondent must submit monthly compliance reports (Prime Contractor Progress Assessment Report – PAR) to the contracting agency, verifying its iance with the HSP, including the use of and expenditures made to its subcontractors (HUBs and Non-HUBs). (The PAR is available at <a href="http://www.window.state.tx.us/procurement/prog/hub/hub-forms/progressassessmentrpt.xls">www.window.state.tx.us/procurement/prog/hub/hub-forms/progressassessmentrpt.xls</a> ).
subcor approv	espondent must seek approval from the contracting agency prior to making any modifications to its HSP, including the hiring of additional or different intractors and the termination of a subcontractor the respondent identified in its HSP. If the HSP is modified without the contracting agency's prior val, respondent may be subject to any and all enforcement remedies available under the contract or otherwise available by law, up to and including ment from all state contracting.
	espondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headquarters and/or work-site where services eing performed and must provide documentation regarding staffing and other resources.

\_Matthew Bowman\_

Printed Name

\_President\_

Title

\_\_12/5/2012\_

Date

%

Aggregate percentages of the contract expected to be subcontracted:

\_\_On File

Signature

%

%

# **REMINDER:** > If you responded "**Yes**" to **SECTION 2, Items c or d**, you must complete an "HSP Good Faith Effort - Method A (Attachment A)" for <u>each</u> of the subcontracting opportunities you listed in SECTION 2, Item b.

If you responded "No"SECTION 2, Items c and d, you must complete an "HSP Good Faith Effort - Method B (Attachment B)" for <u>each</u> of the subcontracting opportunities you listed in SECTION 2, Item b.